



**Federal Communications Commission  
Office of the Secretary**

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**Federal Agency Responses to FCC Questionnaire  
Report on Rural Broadband Strategy, GN Docket No. 09-29**

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*Federal Communications Commission  
Office of the Secretary*

**Question 1: Please list and describe your agency's rural programs.**

**Department of Health and Human Services**

- I. Agency for Healthcare Research and Quality (AHRQ) – Contact: Erin Grace,  
[Erin.Grace@AHRQ.hhs.gov](mailto:Erin.Grace@AHRQ.hhs.gov); (301) 427-1580

AHRQ considers those living in rural areas to be a priority population. As such, the agency prioritizes health services research focused on improving the quality, safety, efficiency and effectiveness of health care for rural Americans. In 2004/2005, AHRQ's health information technology (IT) portfolio included funding that was specifically set aside for researching the impact of health IT in rural and underserved areas. Additional information on AHRQ's health services research in rural areas can be found at <http://www.ahrq.gov/research/ruralix.htm>. Information on health IT research projects in rural areas can be found on the health IT website at [www.healthit.ahrq.gov](http://www.healthit.ahrq.gov).

- II. Indian Health Service (IHS) – Contact: Theresa Cullen, [Theresa.Cullen@ihs.gov](mailto:Theresa.Cullen@ihs.gov), (301) 443-9848

The Indian Health Service (IHS) is an agency within the Department of Health and Human Services (HHS). The IHS provides a comprehensive health service delivery system for approximately 1.9 million of the nation's estimated 3.3 million American Indians and Alaska Natives. Indian health care services are provided in over 700 IHS and tribal health care facilities including 45 hospitals, 303 health centers, 132 health stations, and 166 Alaska village clinics scattered throughout 36 states, mostly in rural and isolated areas. For most Indian people, IHS-supported programs are the only source of health care. No alternative sources of medical care are available in many cases, especially in isolated areas. The following link provides IHS and tribal facility locations within each of the 12 IHS Areas, or geographical regions:  
<http://www.ihs.gov/index.cfm?module=AreaOffices>

- III. Health Resources and Services Administration (HRSA); Contact: Dena Pushkin,  
[DPuskin@hrsa.gov](mailto:DPuskin@hrsa.gov); (301) 443-3682

HRSA administers many programs that address rural barriers to health care and the raised in this questionnaire. Some programs are directed at educating health professionals, while others may be addressing specialized populations, such as persons living with HIV or mothers and children. Others are directed to building the infrastructure for health systems or services, such as our community health center grant programs. Given time constraints, we were not able to catalog all of them for this response. However, the vast majority of these programs are described on our website: <http://www.hrsa.gov>. We have instead chosen to focus on two components of HRSA – The Office for the Advancement of Telehealth (OAT) in our Office of Health Information Technology (OHIT) and our Office of Rural Health Policy (ORHP). Both of these offices administer programs that are particularly relevant to this questionnaire.

## **A. Office of Health Information Technology/Office for the Advancement of Telehealth**

The Office of Health Information Technology works to promote the cost-effective use of health information technology in underserved communities. Organizationally, it contains three divisions: 1) The Office for the Advancement of Telehealth (OAT); 2) The Division of State and Community Assistance (DSCA); 3) Division of HIT Policy. HRSA also has a number of initiatives directed at promoting the expansion of electronic health records and other HIT technology in underserved urban and rural communities that are managed by DSCA. Although not strictly limited to rural, these initiatives provide an excellent opportunity for increasing the support for services in rural communities that may deploy broad band applications. Descriptions of DSCA's programs will be forwarded to you under separated cover during the week of April 13.

### **1. Telehealth Network Grant Program (TNGP)**

The TNGP demonstrates how Telehealth programs and networks can improve access to quality health care services in underserved rural and urban communities. The TNGP facilitates a broad range of clinical services. The program is authorized by Section 330I of the Public Health Service Act, 42 USC § 254c-14. The Health Care Safety Net Amendments of 2002 (Public Law 107-251) amended the Public Health Service Act by adding Section 330I. Projects are overseen by HRSA's Office for the Advancement of Telehealth (OAT) within the Office of Health Information Technology (OHIT). The program is currently being competed for a new 3-year cycle of grants.

Under the TNGP, grants are to be awarded in two ways:

- Telehealth Networks (TNGP-TH), which support Telehealth networks that provide services in different settings that include long-term care facilities, community health centers or clinics, physician offices (including dental offices), hospitals, schools, assisted living facilities, homes).
- Tele-homecare Networks (TNGP-THC), which are focused on demonstrating how Telehealth networks can improve healthcare through provision of clinical care and remote monitoring of individuals in their place of residence using Telehealth technologies. TNGP-THC grants provide a mechanism to evaluate the cost and effectiveness of remote tele-homecare services and vital sign monitoring of individual patients and the delivery of healthcare services to individuals in their place of residence by a healthcare provider using telecommunications technologies to exchange healthcare information over a distance.

Applicants must provide an evaluation design to measure process and outcomes. Quantitative outcomes should be measured in the following areas: impact on quality of care; appropriateness of use of the technology; whether access was improved; whether clinical outcomes were improved; and, how the cost of service delivery was affected in terms of efficiency and effectiveness of care.

Organizations eligible to apply for these grants include either rural or urban nonprofit entities that will provide services through a Telehealth network or a tele-homecare network. Although grants for services to urban communities are authorized under the TNGP, the legislation stipulates that the total amount of funds awarded for grants serving rural communities under the TNGP be no less than the total amount of funds awarded for such projects in fiscal year 2001 under the prior Rural Telemedicine Grant Program (RTGP). Past appropriations and the projected FY 09 Appropriation for the TNGP are expected to be less than the FY 01 Appropriation for the RTGP. Therefore, all TNGP grants awarded in FY 09 will be for projects that provide services to rural communities. Eligible applicants may include faith-based and community based organizations, Indian Tribes and Tribal organizations. Network participants may be for-profit or non-profit entities.

The TNGP guidance also specifically lists those types of entities that may participate in an eligible telehealth network [at least two (2) of the following entities must be included of which at least one (1) of which must be a community-based health care provider]. Those entities include:

- Community or migrant health centers or other federally qualified health centers.
- Health care providers, including pharmacists, in private practice.
- Entities operating clinics, including rural health clinics.
- Local health departments.
- Nonprofit hospitals, including community (critical) access hospitals.
- Other publicly funded health or social service agencies.
- Long-term care providers.
- Providers of health care services in the home.
- Providers of outpatient mental health services and entities operating outpatient mental health facilities.
- Local or regional emergency health care providers.
- Institutions of higher education.
- Entities operating dental clinics.
- Other entities may be included in the network (e.g. state or local correctional facilities); however, they shall not be counted as one of the two required sites.

HRSA's website under telehealth programs contains a detailed listing of key organizations that have been funded under the TNGP as well as through other grant programs administered by the Office of Health Information Technology's Office for the Advancement of Telehealth. The link to the list of organizations funded is accessible as follows:  
<http://www.hrsa.gov/telehealth/grantedirectory/overview.htm> .

## **2. Telehealth Resource Center Grant Program (TRCGP)**

The TRCGP funds centers of excellence to provide technical assistance to new and existing telehealth programs and networks for increasing the implementation of cost-effective telehealth programs. The ultimate goal of the program is to increase the number of sustainable Telehealth programs that are able to breach the barriers rural and underserved communities face in providing access to services and quality of health care to those in need.

The TRCGP has been instrumental in assisting start-up telehealth networks that desire to provide critically needed clinical services to underserved populations. The TRCGP funds those organizations with experience in providing clinical care through telehealth technology to connect people and disseminate lessons learned so that limited funds devoted to telehealth can be most effectively utilized.

The TRCGP is authorized under the Health Care Safety Net Amendments of 2003, Section 330I of the Public Health Service Act, P.L. 107-251. The program is administered by the Office for the Advancement of Telehealth in the Office of Health Information Technology, Health Resources and Services Administration. Funds were appropriated for the TRCGP in 2005 and the program was started in 2006. The program is currently being competed for a new three-year cycle of grants.

In the first 2006 competition, each of the five Regional Resource Centers (with a strong record in implementing telehealth services) was chosen to serve as focal points for providing technical assistance (TA) for nascent telehealth programs to advance the effective use of telehealth technologies. The Regional Resource Centers provide customized technical assistance at three levels: promoting peer-to-peer consultation, individualized consultations, and broad-based technical assistance through websites, webinars, and other distance educational/outreach efforts to facilitate: effective technology assessment and implementation; navigating telemedicine reimbursement and other payment issues; project/program evaluation; network operations; strategic/business planning; best practice models; evaluation design and metrics; clinical protocol development; telecommunications; industry standards; and locating and assessing funding sources.

One National Resource Center was selected to provide a mechanism for sharing experiences across the nation in addressing legal and regulatory barriers to the effective implementation of telehealth technologies. The National Resource Center is available to assist with: reimbursement; licensure; FDA regulatory issues; credentialing and accreditation; privacy, security and confidentiality; and, telecommunications legal and regulatory issues.

A broad range of organizations, which would either be eligible for funding under the TRCGP, or be beneficiaries of the services provided by grantees under the TRCGP, are interested in the TRCGP. Eligible applicants include public and private nonprofit organizations and institutions, including State and local governments. Faith-based and community-based organizations are eligible to apply for the TRCGP, as are tribes and tribal organizations. Critically, this program focuses on grantees that will provide technical assistance as opposed to merely providing telehealth services. Accordingly, applicants and network partners must demonstrate that they have the ability to provide effective technical assistance based on their successful track record in devising implementing and managing telehealth networks. A link to an overview and areas served by the resource centers is as follows:  
<http://www.cteonline.org/TRC.html>

The links for the 6 grantees that currently receive funding under the TRCGP, are as follows:

1. Center for Telehealth and eHealth Law (National Center)
2. California Telemedicine & eHealth Center
3. Great Plains Telehealth Resource Center and Assistance Center
4. Midwest Alliance for Telehealth and Technology Resources
5. Northeast Telehealth Resource Center
6. Northwest Regional Telehealth Resource Center

### **3. Licensure Portability Grant Program (LPGP)**

The LPGP provides support for State professional licensing boards to carry out programs under which licensing boards of various States cooperate to develop and implement State policies that will reduce statutory and regulatory barriers to telemedicine practiced across state lines. Although not strictly a rural issue, cross-state licensure barriers are increasingly thought to be a barrier in many rural areas of the United States.

The LPGP is authorized by Section 330L of the Public Health Service Act, 42 USC 254c-18. This grant program is under the auspices of the Health Resources and Services Administration (HRSA), U.S. Department of Health and Human Services (HHS). Projects are overseen by HRSA's Office for the Advancement of Telehealth (OAT) within the Office of Health Information Technology.

Funds were authorized in 2002 but not appropriated for the program until 2005, and the LPGP was launched in 2006. The program is designed to leverage the experience of State licensing boards that have a strong record in implementing cross-border activities to overcome licensure barriers to the provision of telemedicine services across many states. The program is currently undergoing a competition for a new 3-year cycle of grants.

Of great current concern for telemedicine providers has been state licensure restrictions against cross-state practice for physicians, requiring physicians to have a license in each state where he or she may provide telemedicine services on a regular basis. This is particularly a problem for physicians who are providing highly specialized services around the country, particularly mental health services, where available and cost-effective specialized expertise often resides across state lines from where the most medically underserved populations are located. In addition, there is often a pressing need for oral health services that can be met with practitioners from other states.

Under the current 3-year Licensure Portability grant, the Federation of State Medical Boards (FSMB) is developing model agreements in two regions of the country (Northeast and West) to expedite the licensure process and eliminate redundancies associated with applying for licenses in multiple jurisdictions. Thirteen state medical boards have been involved in this initiative – 1) In the Northeast, six states: Maine, Massachusetts, Vermont, Connecticut, Rhode Island, and New Hampshire; and, 2) In the West, seven states: North Dakota, Kansas, Colorado, Minnesota, Iowa, Idaho, and Oregon.

The need to harmonize licensure rules across states also has been well recognized by the nursing profession. The Nurse License Compact was developed by the National Council of State Boards of Nursing (NCSBN) in the late 1990s. The mutual recognition model of nurse licensure allows a nurse to have one license (in his or her state of residency) and to practice in other states (both in person and electronically), subject to each state's practice law and regulation. Although there was quick adoption of the compact initially, adoption has been slow and to date, only 23 states have adopted the compact. Under a 3-year Licensure Portability grant, the NCSBN continues to address barriers that prevent interstate nursing practice by focusing on providing pathways to facilitate the adoption of the Uniform Core Licensure Requirements (UCLRs) which include criminal background checks (CBCs). In addition, NCSBN has helped promote the Nurse Licensure Compact (NLC) which promotes adoption of the UCLRs.

The FY2009 competition will seek projects that can clearly serve as national models and have implications for overcoming State statutory and regulatory licensure barriers to cross-state practice of telemedicine for all the health professions, with an emphasis on projects proposed by boards or national organizations of professional licensing that have demonstrated success in pioneering creative programs to address these issues.

A link to the FSMB, which outlines its public policy activities, including the OAT-funded LPGP grant is <http://www.fsmb.org/>. The contact for the grant is Lisa A. Robin, Senior Vice President, Member Services, phone number 817-868-4053.

A link to the NCSBN, which outlines its public policy activities, including the OAT-funded LPGP grant is <https://www.ncsbn.org/index.htm>. The contact for the grant is Kristen Ann Hellquist, MS, Policy and Government Relations Director, phone number 312-525-3665.

## **B. Office of Rural Health Policy**

The Office of Rural Health Policy (ORHP) promotes better health care service in rural America. Established in August 1987 by the Administration, the Office was subsequently authorized by Congress in December 1987 and located in the Health Resources and Services Administration. Congress charged the Office with informing and advising the Department of Health and Human Services on matters affecting rural hospitals, and health care, coordinating activities within the department that relate to rural health care, and maintaining a national information clearinghouse. The Office works both within government at federal, state and local levels, and with the private sector -- with associations, foundations, providers and community leaders -- to seek solutions to rural health care problems.

### Grant Programs for Rural Providers

- Rural Health Outreach grants support service delivery through collaboration. Each grantee forms a consortium with at least two partners.
- Network Development grants support the development of networks of at least three health care organizations that integrate systems of care administratively, clinically, financially and technologically.

- Network Development Planning one-year grants support planning to develop and operationalize health care networks.
- Delta States Rural Development Network grants support development of new and innovative health care delivery systems in the Mississippi Delta region.
- Delta Rural Hospital Improvement Project grants support hospitals in the Mississippi Delta region improve financial, quality and operational performance.
- Delta Health Initiative Cooperative Agreement Program aims to improve the health status of the people living in the rural Mississippi Delta.
- Rural Access to Emergency Devices grants assist rural communities to purchase automated external defibrillators (AEDs) and provide training in their use and maintenance.
- Public Access to Defibrillation Demonstration Projects grants support projects that increase public access to emergency medical devices and services.
- Small Rural Hospital Improvement grants assist small rural hospitals to pay for costs related to the implementation of PPS, comply with provisions of HIPAA and reduce medical errors and support quality improvement.
- Frontier Extended Stay Clinic Cooperative Agreement grants examine the effectiveness and appropriateness of this new type of health care provider in certain remote locations.
- Small Health Care Provider Quality Improvement grants assist rural providers with the implementation of quality improvement strategies, while improving patient care and chronic disease outcomes.
- Black Lung Clinics grants support public and private nonprofit entities in the operation of clinics that provide diagnosis, treatment, and rehabilitation of active and retired coal miners with respiratory and pulmonary impairments.
- Radiation Exposure Screening and Education grants support health care providers in the operation of clinics that educate, screen, diagnose and treat people affected by the mining, transport and processing of uranium and the testing of nuclear weapons for the Nation's weapons arsenal.

#### Grant Programs for States

- FLEX Critical Access Hospitals Health Information Technology Network grants support the development of pilot programs in States that create networks to develop and implement Health Information Technology systems, such as practice management, disease registry, care management, clinical messaging, personal health record, electronic health records and health information exchange systems.
- State Offices of Rural Health grants assist States in strengthening rural health care delivery systems by maintaining a focal point for rural health.
- Rural Hospital Flexibility grants are awarded to States to help them develop and implement Rural Health Plans with broad collaboration; stabilize rural hospitals by helping them consider, plan for and obtain designation as Critical Access Hospitals; assist Critical Access Hospitals, other providers, and communities as they develop networks of care; improve and integrate emergency medical services; and improve quality of care.



IV. Centers for Disease Control – Contact: Carl Kinkead, [mke5@cdc.gov](mailto:mke5@cdc.gov), (404) 498-2468

CDC does not support broadband directly in local and state health but we support programs, such as TB, HIV/AIDs, Cancer, Immunization, that may use part of their money to pay for connections. The FCC's broadband initiative does support CDC's public health grid initiative though. CDC are working on a geospatial shared services framework to share web services across public health to support programs and leverage each others investments so the broadband initiative definitely supports that.

**Department of Agriculture** – Contact: Jonathan P. Claffey, [Jon.Claffey@wdc.usda.gov](mailto:Jon.Claffey@wdc.usda.gov), (202) 720-9556

USDA Rural Development administers over 40 programs that provide infrastructure, housing, community facilities, and economic development assistance to rural residents, businesses and communities. Programs include grants, loans, loan guarantees, and technical assistance. The total loan portfolio (direct and guarantees) now exceeds \$110 billion. \$53.4 billion of this total portfolio is managed by Rural Utilities Service (RUS).

**Rural Utilities Service Programs**

- RUS provides capital for rural electric, telecommunications, and water and environmental projects.
- RUS programs leverage federal funds with private capital for investing in rural infrastructure, technology, and the development of human resources. Direct and guaranteed loans and grants are available. Financial assistance is provided to rural utilities; municipalities; commercial corporations; public utility districts; Indian tribes; and cooperative, nonprofit, limited-dividend, or mutual associations.

**Department of Housing And Urban Development** – Contact: Laura Grossman, [Laura.S.Grossman@hud.gov](mailto:Laura.S.Grossman@hud.gov), (202) 402-5541

1. Public & Indian Housing/Office of Native American Programs (ONAP)

Rural Housing and Economic Development

In addition, ONAP administers programs for Indian tribes and organizations that are inherently rural, but not defined as such. These program are:

Indian Housing Block Grant

Indian Community Development Block Grant

Native Hawaiian Housing Block Grant

Section 184 Loan Guarantee

Section 184A Loan Guarantee

## Title VI Loan Guarantee

### II. Office of Universities Partnerships

**Tribal Colleges and Universities Programs** – The purpose of the program is to assist Tribal Colleges and Universities (TCU) to build, expand, renovate, and equip their own facilities, and to expand the role of the TCUs into the community through the provision of needed services such as health programs, job training, and economic development activities.

### III. Office of Rural Housing and Economic Development

The Office of Rural Housing and Economic Development was established in the Department of Housing and Urban Development under Public Law 105-276, October 21, 1998 by the Congress. The law consisted of three congressional directives: 1) establish an office called the “Office of Rural Housing and Economic Development;” 2) administer a competitive program called the “Rural Housing and Economic Development Program,” with a congressionally mandated announcement deadline of June 1 or September 1 of each year; and 3) develop a clearinghouse of ideas for innovative strategies for rural housing and economic development and revitalization. In addition to these directives, the office director also administers the Section 4 Loan Guarantee Recovery Fund (Church Arson Loan Guarantee Program).

The purpose of the Rural Housing and Economic Development Program is to develop capacity at the State and local level and support innovative rural housing and economic development. Grants are awarded to local rural nonprofits, community development corporations, federally recognized Indian tribes, State housing finance agencies, and State community and/or economic development agencies. This program is designed to address the problems of rural poverty, inadequate housing, and lack of economic opportunity with a specific focus on high need rural areas including the Lower Mississippi Delta Region (8 states and 240 counties), the Colonias, the Appalachia's Distressed Counties, Federally recognized Indian tribes, and Seasonal farm workers.

The purpose of the Rural Gateway is to facilitate informational services, technical assistance, training, and investment capital for local rural, state, and regional organizations in order to support their efforts to rebuild and preserve healthy, productive communities. Furthermore, the Rural Gateway acts as a screen/filter for private sector organizations to establish economic development based initiatives. The objectives are to: 1) build capacity of organizations working on housing, economic development and infrastructure development; 2) serve as a promoter and screen/filter of private sector based partnerships to support housing, economic development, infrastructure and capacity building activities; and 3) improve and streamline access of these organizations to different sources of government, nonprofit, and for-profit sources of investment capital, technical assistance and training and information.

The Rural Gateway menu of services include: 1) 1-800 information specialist (1-877-Rural-26) and website ([www.hud.gov/ruralgateway](http://www.hud.gov/ruralgateway)); 2) technical assistance and training; 3) rural case studies; 4) internet links to rural housing and economic development resources sites; 5) funding

summaries; 6) peer-to-peer forums (conferences, workshops, listservs); and 7) private sector partnership interface mechanism.

**Small Business Administration/Office of Advocacy** – Contact: Cheryl M. Johns, [Cheryl.Johns@sba.gov](mailto:Cheryl.Johns@sba.gov), (202) 205-6949

Advocacy does not have specific rural programs, but has conducted research and commented on rural small business needs. Our last study was entitled: Broadband Use by Rural Small Businesses.

## **Department of Education**

**Office of Special Education and Rehabilitative Services (OSERS)** – Contact: Jennifer Sheehy, [Jennifer.sheehy@ed.gov](mailto:Jennifer.sheehy@ed.gov), (202) 245-7520

### **I. Office of Special Education Programs (OSEP)**

OSEP's mission is to improve results for infants, toddlers, children, and youth with disabilities ages birth through 21 by providing leadership and financial support to assist states and local districts. The Individuals with Disabilities Education Act (IDEA) authorizes formula grants to states, and discretionary grants to institutions of higher education and other non-profit organizations to support research, demonstration projects, technical assistance and dissemination, technology and media services, personnel development, and parent-training and information centers. IDEA serves approximately 6.8 million children and youth with disabilities. IDEA programs are funded at approximately \$13 billion.

OSEP has no programs that are specifically focused on rural or broadband services and issues. However, OSEP administers two types of programs authorized under the Individuals with Disabilities Education Act (IDEA) which may have relevance to the rural broadband initiative. The formula grant programs authorized under IDEA Parts B and C award state-level grants to support the provision of services to children with disabilities, and the discretionary programs authorized under IDEA Part D award contracts and grants in such areas as personnel development, technical assistance and dissemination, parent training and information, technology development and demonstration, media services, and instructional materials. While none of these programs can make major direct investments in developing broadband infrastructure, they can contribute by (a) stimulating interest and demand for broadband in rural areas which may contribute to public and private investments in broadband infrastructure, and (b) providing limited support for the acquisition of equipment and alteration of facilities to contribute to broadband infrastructure. Examples follow –

- Under certain circumstances, IDEA formula grant funds can be used for the acquisition of equipment and the construction or alteration of facilities, although the degree to which such expenditures might contribute to rural broadband has not been determined. For example, IDEA funds can be used to purchase assistive technology devices and services for children with disabilities if required as part of their special education or related services. In addition, in some cases IDEA formula grant funds may be used in the construction or alteration of facilities. Such expenditures must improve services for children with disabilities under IDEA

and may require approval from the Secretary of Education. If such expenditures were found to be appropriate to support some aspect of rural broadband development, the benefits would be limited primarily to students with disabilities, but partnership arrangements with other agencies might be possible in which resources were pooled to build broadband infrastructure to benefit multiple service populations. [Jennifer—We need some legal input on this to see how viable it might be as an option for IDEA to contribute to broadband development.] OSEP already has partnership arrangements with other federal agencies that might provide a basis for these efforts. For example, OSEP participates in a workgroup on early childhood services with agencies from the Department of Health and Human Services, including the Child Care Bureau, Office of Head Start, Health Resources and Services Administration, and the Substance Abuse and Mental Health Services Administration. This workgroup does not specifically address rural broadband as a topic and has no direct funding authority, but it and similar workgroups might provide a starting point for the development of interagency broadband efforts.

- Providing services mandated under Parts B and C to children in rural settings has been found to involve challenges for which broadband services might be particularly useful. For example, efforts to provide early childhood services in natural settings such as the home are more difficult in rural settings, but broadband allows service providers to visit homes remotely and provide information, training and support. Similar benefits have been observed in other types of service, such as assistive technology evaluations. Services involving specialized forms of professional expertise or low-incidence disabilities may particularly benefit from broadband services in rural areas.
- Several of the Part D discretionary programs support projects that make use of broadband technology, and broadband access is becoming an essential component of many of the efforts supported under Part D. For example, the Parent Training and Information Centers and Community Parent Resource Centers increasingly rely on broadband to deliver information and training in rural areas, and in some cases the absence of broadband is a significant barrier to the performance of their missions. Personnel preparation programs are increasingly making use of distance education based on broadband technologies, and rural broadband is necessary to make some training opportunities available to personnel in rural areas. Projects that distribute accessible media and materials, such as Bookshare, Captioned and Described Educational Media, Recordings for the Blind and Dyslexic, and Television Access projects rely on broadband technology to deliver their services and materials.

## II. Rehabilitation Services Administration (RSA)

RSA administers the Assistive Technology (AT) State Grants Programs:

- AT State Grants programs strive to make Assistive Technology equally available to all individuals with disabilities throughout the state...to expand the availability of access to technology, including electronic and information technology to individuals with disabilities.
- Individuals with disabilities can benefit from broadband access through:

- Virtual assistive technology device demonstrations
- Virtual training/tech support on device use
- Efficient access to online exchange programs of assistive technology devices.
- AT programs provide financial loans to individuals with disabilities to enable them to purchase the technology necessary to work from home (or any other remote location). Broadband access (or lack thereof) could have an impact on this ability.
- AT programs provide financial loans to individuals with disabilities to enable them to purchase any assistive technology device which can include equipment for distance education and/or information technology connectivity.

### III. National Institute on Disability and Rehabilitation Research (NIDRR)

NIDRR, through its Rehabilitation Engineering Research Center (RERC) on Universal Interface and Information Technology Access, is working to ensure that all broadband services are accessible and usable by people with disabilities. NIDRR, through this Center, is exploring ways to ensure that people with disabilities from all socio-economic levels are able to access broadband (Internet) based information and services.

NIDRR, through its RERC on Telerehabilitation, serves people with disabilities by researching and developing methods, systems, and technologies that support remote delivery of rehabilitation and home health care services for individuals who have limited local access to comprehensive medical rehabilitation outpatient and community-based services.

NIDRR, through its Rural Rehabilitation Research Training Center (RRTC), has funded research that specifically targeted telecommunications for people with disabilities living in rural areas. Such as:

1. Rates of computer and Internet use: A comparison of urban and rural access by persons with disabilities examines rates of computer ownership, computer use, and Internet access.
2. Rural facts: Disability and the digital divide: Comparing surveys with disability data. Facts sheet presented an analysis of national surveys examining Internet access and use by people with disabilities. The surveys consistently showed that as computer access and internet use has steadily increased, both metropolitan and non-metropolitan people with disabilities have lower access rates than their geographic counterparts with no disability. However, non-metropolitan people with disabilities have the lowest rate.
3. Issues related to accessibility of telecommunications for people living in rural areas addresses physical and economic aspects accessibility, legal protections for access, and issues of equity.
4. Social isolation of persons with disabilities, effects of telecommunications on rural health care and rehabilitation services, barriers to telecommunications access, and related federal legislation.
5. Tele-health promotion for rural people with disabilities: Toward a technology assisted peer-support model. This study examined the feasibility of an Internet health promotion program for people with disabilities who live in rural areas. Based on recommendations,

procedures and materials were being developed to combine peer support with the online program to use in the outreach efforts to increase consumer participation.

Many of the products and services that NIDRR grantees have produced would have greater accessibility and availability if a rural broadband initiative was implemented.

**DoEd, Office of Elementary and Secondary Education** – Contact: Jenelle Leonard, [Jenelle.Leonard@ed.gov](mailto:Jenelle.Leonard@ed.gov), (202) 401-3641

## **I. Rural Education Achievement Program**

- The Small, Rural School Grant Program

This program includes:

- The Small, Rural School Grant Program

### **PROGRAM DESCRIPTION**

The purpose of this program is to provide financial assistance to rural districts to assist them in meeting their state's definition of adequate yearly progress (AYP). Applicants do not compete but rather are entitled to funds if they meet basic eligibility requirements. Eligibility is restricted by statute. Awards are issued annually directly to eligible LEAs on a formula basis.

Recipients may use program funds to conduct activities under the following ESEA programs: Title I, Part A (Improving Basic Programs Operated by LEAs; # 84.010); Title II, Part A (Improving Teacher Quality State Grants, # 84.367); Title II, Part D (Educational Technology State Grants, # 84.318); Title III (Language Instruction for Limited English Proficient and Immigrant Students); Title IV, Part A (Safe and Drug-Free Schools and Communities); Title IV, Part B (21st-Century Community Learning Centers, # 84.287); and Title V, Part A (State Grants for Innovative Programs).

- Rural and Low-Income Schools Program

### **PROGRAM DESCRIPTION**

The purpose of the program is to provide financial assistance to rural districts to assist them in meeting their state's definition of adequate yearly progress (AYP). Applicants do not compete but rather are entitled to funds if they meet basic eligibility requirements. Eligibility is restricted by statute.

Awards are issued annually to SEAs, which make subgrants to LEAs that meet the applicable requirements. Awards are made to all SEAs that apply and meet the applicable requirements of the act. If an SEA does not participate, awards are issued by the Department to eligible LEAs in the state either competitively or by formula.

Recipients may use program funds to conduct the following activities:

- Teacher recruitment and retention, including the use of signing bonuses and other financial incentives;
- Teacher professional development, including programs that train teachers to use technology to improve teaching and that train teachers of students with special needs;
- Support for educational technology, including software and hardware, that meets the requirements of ESEA, Title II, Part D (Enhancing Education Through Technology; # 84.318);
- Parental involvement activities;
- Activities authorized under the Safe and Drug-Free Schools and Communities: State Grants program (ESEA, Title IV, Part A, Subpart 1; # 84.186A);
- Activities authorized under ESEA, Title I, Part A (Improving Basic Programs Operated by LEAs; # 84.010); or
- Activities authorized under ESEA, Title III (Language Instruction for Limited English Proficient and Immigrant Students).

## II. Center for Rural Education

The Center for Rural Education (CRE) is responsible for providing a unified approach to rural education through the coordination of programs within the Department. The CRE also works with the Federal Interagency Committee on Education to coordinate related activities and programs of other Federal department and agencies. The CRE serves as the Department's principal voice on education issues affecting rural populations nationwide.

**Department of the Interior** – Contact: Stuart Ott, [Stuart\\_Ott@ios.doi.gov](mailto:Stuart_Ott@ios.doi.gov), (703) 648-5517

The Department of the Interior (DOI) is the nation's principal conservation agency. Our mission is to protect America's treasures for future generations, provide access to our nation's natural and cultural heritage, offer recreation opportunities, honor our trust responsibilities to American Indians and Alaska Natives and our responsibilities to island communities, conduct scientific research, provide wise stewardship of energy and mineral resources, foster sound use of land and water resources, and conserve and protect fish and wildlife. The work that we do affects the lives of millions of people; from the family taking a vacation in one of our national parks to the children studying in one of our Indian schools.

Interior is a large, decentralized agency with over 67,000 employees and 280,000 volunteers located at approximately 2,400 operating locations across the United States, Puerto Rico, U.S. territories, and freely associated states. We discharge our responsibilities on a \$16.8 billion total annual budget. DOI raises more than \$18.2 billion in revenues collected from energy, mineral, grazing, timber, recreation, land sales, and other revenue producing activities.

DOI manages 500 million acres of surface land, or about one-fifth of the land in the United States. Much of this land is located in rural areas.

- 256 million acres managed by the Bureau of Land Management
- 96.2 million acres managed by the Fish and Wildlife Service
- 84.6 million acres managed by the National Park Service
- 8.7 million acres managed by the Bureau of Reclamation associated with Reclamation projects
- 66 million acres managed by the Bureau of Indian Affairs
- Over 200,000 acres of abandoned coal mine sites have been reclaimed through the Office of Surface Mining's Abandoned Mine Land Program.

## Department of Commerce

- I. Economic Development Administration (EDA) – Contact: Maureen Klovers, [mklovers@eda.doc.gov](mailto:mklovers@eda.doc.gov), (202) 482-2785

EDA administers the following programs, all of which have recipients in both rural and urban areas:

- **Public Works and Economic Development** investments help distressed communities to revitalize, expand, and upgrade their physical infrastructure to generate or retain long-term, private-sector jobs and investment. In the past, EDA has used this program to construct business incubators and expand broadband networks, among many other activities.
- **Planning** investments encourage and support professional planning and related services through local development organizations. In the past, EDA has used this program to conduct feasibility studies for business incubators and other innovation-based projects, as well as develop and update Comprehensive Economic Development Strategies, which often have a strong innovation focus.
- **Technical Assistance** investments help communities assess the potential success of economic development investments, provide technical expertise, and develop innovative demonstration projects. The bulk of program funds are used to support EDA's network of University Centers, which support a wide variety of innovative activities tailored to the unique needs of the regions they serve, ranging from a legal clinic for entrepreneurs, to a horticultural institute focusing on linking organic producers to the worldwide marketplace, to a center focused on commercializing research in the field of alternative energy. Others focus on technology transfer programs or services for manufacturers.
- **The Research and Evaluation** program supports the development and dissemination of critical, cutting-edge research and best practices to regional, state, and local practitioners in the economic development field.
- **Trade Adjustment Assistance for Firms** funds a national network of eleven Trade Adjustment Assistance Centers (TAACs) to help U.S. manufacturing and production firms that have lost domestic sales and employment due to increased import competition become more globally competitive.
- **The Economic Adjustment Assistance (EA)** program provides a flexible portfolio of investment assistance to communities facing economic crises. Using this program, communities develop a regional strategy that re-thinks their economic future and develop



action plans. Once the regional strategy is in place, EDA provides critical implementation assistance through local capacity-building initiatives, essential infrastructure projects, and the capitalization of revolving loan funds.

II. National Telecommunications and Information Administration (NTIA) – Contact: Tim Sloan, [tsloan@ntia.doc.gov](mailto:tsloan@ntia.doc.gov), (202) 482-1880

NTIA has no rural-specific programs. It does, however, have a number of grant programs that may provide funds to organizations and activities in rural areas:

- Broadband Technology Opportunity Program (BTOP)

The American Recovery and Reinvestment Act of 2009 (Recovery Act), P.L. 111-5, appropriated \$4.7 billion to BTOP for the purpose, among other things, of issuing grants to extend broadband communications facilities and services to “unserved” and “underserved” areas. Many unserved areas, in particular, would likely be classified as “rural” under other Federal programs (e.g., the U.S. Department of Agriculture’s (USDA) telecommunications loan and grant programs). BTOP funds will also be available for various community anchor institutions (libraries, schools, hospitals, public safety) that serve rural areas. NTIA is now in the process of implementing BTOP. Initial grant awards will be made later this year.

- Public Telecommunications Facilities Program (PTFP)

PTFP is a competitive grant program to help public broadcasting stations, state and local governments, Indian Tribes, and nonprofit organizations construct facilities to bring educational and cultural programs to the American public using broadcasting and nonbroadcasting telecommunications technologies.

- Low Power Television and Translator Grant Programs

NTIA has two grant programs in this area: The Conversion Program provides funds to low-power television stations (LPTV) that must purchase devices to convert incoming digital signals from full-power television stations to analog for retransmission by the LPTV stations. The Upgrade Program will provide funds to upgrade analog low-power television broadcast stations, Class A television stations, television translator stations, and television booster stations in rural communities to digital transmission.

**Appalachian Regional Commission** – Contact: Mark DeFalco, [mdefalco@arc.gov](mailto:mdefalco@arc.gov), (202) 884-7719

The Appalachian Regional Commission (ARC) is an economic development agency which operates in the 420 counties of Appalachia. Special emphasis is placed on economically distressed counties. 42% of the population in Appalachia is considered rural. The ARC program

activity includes a wide range of assistance including the construction of the Appalachian Development Highway System (ADHS), health care initiatives, assistance in the construction of water and sewer infrastructure, education and workforce training assistance, capacity building, entrepreneurship efforts, telecommunications and telemedicine activities and other specific activities related to improving the economic climate in Appalachia.

**Delta Regional Authority** – Contact: Bill Triplett, [bttriplett@dra.gov](mailto:bttriplett@dra.gov), (202) 689-4134

## **DRA Overview**

The Delta Regional Authority (DRA and Authority) is a federal-state partnership created by Congress in the “Delta Regional Authority Act of 2000”, empowering the agency to stimulate economic growth throughout the impoverished Mississippi Delta with its robust regional planning, increased coordination with appropriate stakeholders and targeted investment.

The Authority’s region includes 252 counties and parishes in the states of Alabama, Arkansas, Illinois, Kentucky, Louisiana, Mississippi, Missouri and Tennessee, and its governance includes a board led by the Federal Co-Chairman (appointed by the President and confirmed by the Senate) and the governors of the participating eight states.

For more information about the Authority, please go to [www.dra.gov](http://www.dra.gov).

## **Federal Grant Program Overview**

Since its inception, the DRA has operated its successful federal grant program, maintaining a very strong record of releasing its funds to grantees in a timely manner. Specifically, the DRA has four categories of funding priority:

- Basic Public Infrastructure such as water and sewer systems, bricks and mortar, IT deployment and Broadband;
- Transportation Infrastructure such as highways, ports and rail spurs;
- Workforce Training such as nursing programs and industrial workforce training; and
- Business Development such as business incubators.

As the Authority is a regional planner and coordinator of federal investment, it utilizes basic federal agencies to serve as its day-to-day project administrator, and its most-frequent partner in that role is USDA. Since 2003, the DRA has a Memorandum of Understanding (MOU) with the U.S. Department of Agriculture Rural Utilities Services (USDA-RUS).

## **Key Policy Points.**

DRA’s federal grant program requires:

- Project sustainability beyond the initial investment
- At least 50 percent of its funds to basic public and transportation infrastructure (which includes IT-related infrastructure deployment)

- At least 75 percent of its funding to distressed counties
- Creation and/or retention of jobs, training of people for jobs waiting for them or connecting families to new residential water/sewer.
- Repayment of pro rata share of grant funds if project outcome benchmarks are not realized.

Not surprisingly because of its footprint, most of DRA's federal grant investments are made into rural areas. In fact, in 2006, GAO affirmed that DRA's federal grant program led the nation with its "Rural Investment" intensity, as 77 percent of its investments went into rural areas.

### **Key Leverage Measures**

When Congress created the Authority, it recognized and acknowledged that many rural communities and counties were too poor to compete effectively with other, more-wealthy areas for federal funds. Simply stated, many entities within the DRA did not have the cash to meet the federal match requirements, so therefore, missed funding opportunity after funding opportunity.

Accordingly, Congress sought to remedy this deficiency by mandating that DRA's federal funds would lose their "federal identity", thereby qualifying the Authority to provide the state or local match needed to procure those other federal funds, and to do so while maintaining the grant/match integrity.

After its first seven federal grant cycles, DRA has the empirical evidence to show in the 439 projects it has invested \$64.0 million of its funding:

- The Authority has leveraged (matched) more than \$301 million of other federal, state and local funds – leverage ratio of 1 to 4.71.
- Coupled with its partner investments, DRA is helping to attract more than \$1.6 Billion in private-sector investment, a leverage ratio of 1 to 25.66.

### **Key Program Outcomes**

Since the inception of DRA Federal Grants Program, 204 projects have been completed with the following results:

- 2,801 jobs created
- 6,075 jobs retained
- 13,301 families received improved water and sewer
- 2,588 individuals trained for jobs in their areas.

DRA now has 157 projects which are active with projected outcomes including: 17,335 families who will receive improved water and sewer, 4,306 jobs which will be created, 6,659 jobs which will be retained and 1,198 individuals who will be trained for jobs already committed to this Authority.

For more information about DRA's federal grant program, please go to <http://dra.gov/state-grant-funding/>.

**Institute of Museum and Library Services** – Contact: Mamie Bittner, [MBittner@jmls.gov](mailto:MBittner@jmls.gov), (202) 653-4630

The Institute of Museum and Library Services administers grant programs, collect data and conducts research to build the public service capacity of libraries and museums. It supports innovation, professional development, preservation, community partnerships and a host of educational programs. While the agency has supported many programs that take place in rural areas, there is no specific program for rural development.

**National Council on Disability** – Contact: Martin Gould, [mgould@ncd.gov](mailto:mgould@ncd.gov), (202) 272-2004

We have no rural programs. NCD is an independent federal agency that does not offer programs or services.

**Question 2: Please list and describe your agency's broadband programs.**

**Department of Health and Human Services**

**I. Agency for Healthcare Research and Quality (AHRQ)**

AHRQ does not have any broadband programs.

**II. Indian Health Service (IHS)**

The IHS telecommunication network connects IHS and participating Tribal sites via a cloud-based, Multi Protocol Label Switching (MPLS) network. The average site connects to the IHS network via broadband circuits. The IHS network in turn connects to the HHS network (HHSNet) through two redundant connections in IHS offices in Albuquerque, New Mexico, and Rockville, Maryland. The network is built of routers, switches, and hardware that support Quality of Service.

The IHS, like other government agencies, purchases broadband services through FTS2001 contracts. The IHS Wide Area Network (WAN) is a MPLS broadband network allowing T1 (1.5Mb/s), multiple T1s, DS3 (45Mb/s) and OC services. Approximately 400 IHS sites connect to the IHS WAN with a T1 speed. In addition, there are approximately 40 DS3 circuits; many of those are located in regions that received additional funding per broadband telehealth grants.. The overall IHS broadband usage has doubled over the last 3 years from 35Mb/s to 70Mb/s aggregated across the core network, stemming from an increase in Internet vendor based programs, and from increased telemedicine use to provide higher levels of services in rural areas.

**III. Health Resources and Services Administration (HRSA)**

Programs administered by the Office for the Advancement of Telehealth (OAT) and the Division of State and Community Assistance (DSCA) within HRSA's Office of Health Information

Technology (OHIT) are focused in facilitating, indirectly, the deployment of broadband technology. This is accomplished through grants and contracts that stimulate the market and build the demand for broad band/advanced telecommunications services and/or provide technical assistance to allow users to more effectively deploy broad band infrastructure in their programs, when appropriate.

Our agency intends to work closely with USDA's Rural Utilities Service (RUS) and the Department of Commerce's National Telecommunications and Information Administration (NTIA), whose Federal programs directly deploy broadband facilities through direct payments for the build-out of telecommunications infrastructure.

In a similar fashion, the Office of Rural Health Policy's programs stimulate demand for broadband through their grants and contracts to promote HIT in rural communities.

#### IV. Centers for Disease Control

No Response

### **Department of Agriculture**

The telecommunications program contains two major sources of broadband funding:

- Loans for infrastructure improvement and expansion; since 1993 all facilities financed must be broadband-capable;
- Loans and grants specifically targeted for the deployment of broadband service in small towns and communities.

The infrastructure loan program was created in 1949 and provides loan financing for rural telecommunications service providers serving communities of 5,000 or less.

The broadband loan program was created by the 2002 Farm Bill and subsequently reauthorized and modified by the 2008 Farm Bill. This program is designed to provide funding for the cost of constructing, improving, and acquiring facilities and equipment for broadband service in rural communities of 20,000 inhabitants or less. Program funds are provided through a variety of direct and guaranteed loans. The program was reauthorized and modified under the 2008 Farm Bill.

The Community Connect grant program provides grants to a single rural community which is totally unserved by broadband.

Both the broadband loan program and the Community Connect grant program serve rural communities with population less than 20,000.

### Funding under the American Recovery and Reinvestment Act:

RUS is authorized \$2.5 billion in budget authority under the ARRA. This program will support the expansion of broadband service in rural areas through financing and grants to projects that provide access to high speed service and facilitate economic development in locations without sufficient access to such service and target unserved rural areas.

The ARRA broadband program will:

- Ensure that broadband service is provided to rural areas lacking access, targeting un-served;
- Consider the impact on existing borrowers and prioritize their needs;
- Implement in concert with NTIA/Commerce/FCC national strategy;
- Meet legislative obligation requirements by 9/2010; and
- Establish appropriate monitoring and servicing of the investments at the outset to ensure the objectives are achieved.

The legislation requires that 75 percent of the areas to be served by a project receiving funds shall be in a rural area without sufficient access to high speed broadband service to facilitate rural economic development.

**Department of Housing And Urban Development** – Contact: Laura Grossman,  
[Laura.S.Grossman@hud.gov](mailto:Laura.S.Grossman@hud.gov), (202) 402-5541

#### I. Public & Indian Housing/Office of Native American Programs (ONAP)

None

#### II. Office of Universities Partnerships

The Office of University Partnerships does not have any special broadband programs.

#### III. Office of Rural Housing and Economic Development

Not Applicable

### **Small Business Administration/Office of Advocacy**

Advocacy does not have formal broadband programs, but files regular comments with the FCC and other agencies as needed on broadband and other telecommunications issues.

## **Department of Education**

### **Office of Special Education and Rehabilitative Services**

#### **I. Office of Special Education Programs (OSEP)**

See response to Question 1.

#### **II. Rehabilitation Services Administration (RSA)**

Not applicable.

#### **III. National Institute on Disability and Rehabilitation Research (NIDRR)**

See response to Question 1.

### **DoEd, Office of Elementary and Secondary Education**

The Grant programs listed in response to Question 1 provide and deliver digital content and professional development using broadband and/or produce applications requiring broadband access. The grant programs are not specifically for broadband deployment.

## **Department of the Interior**

DOI consolidated the management of its data services in 2003 by utilizing the GSA FTS2001 Contract. The incumbent was awarded the task of creating the DOI Enterprise Services Network (ESN). The ESN is the end result of DOI's multi-year consolidation and data network reconfiguration effort to centralize the management of five (5) Enterprise Secure Internet Gateways and approximately thirteen (13) wide area networks (WANs) across the country into a single network. As a result of this consolidation and network reconfiguration, DOI's intranet and internet traffic has been consolidated to significantly enhance security and efficiency.

The ESN Contract was designed to provide site-to-site data services via high-speed networks to support applications (e.g., upgraded e-mail, electronic commerce, security services, and videoconferencing) through outsourced services from commercial carriers. These carriers were to provide a private backbone network primarily comprised of circuits, equipment and services procured through the GSA FTS2001 Contract. Currently, the incumbent is responsible for the oversight and management of multiple data communications carriers for service delivery, trouble resolution, and billing functionality. This network supports over 75,000 employees and 200,000 volunteers at approximately 2,600 service delivery points (SDPs) and is engineered to provide secure, state-of-the-art internet and intranet connections and a fully functional operational center for data communications.

The Department additionally runs a separate network, the Educational Native American Network – II (ENAN-II) which provides wide area and internet services to 185 Native American K-12

Schools, 2 Universities and 24 Tribally Controlled Community Colleges. The ENAN-II directly supports 50,000 Elementary and Secondary Students in 23 States.

## **Department of Commerce**

### **I. EDA**

EDA occasionally awards grants to extend rural broadband networks through its Public Works and Economic Development and Economic Adjustment Assistance programs.

### **II. NTIA**

See description of BTOP in the response to Question 1.

## **Appalachian Regional Commission**

ARC began a broadband program in 2002 titled "Information Age Appalachia" (IAA). This program attempts to address four pillars: Access to broadband in rural Appalachia, Training and Education for broadband applications, E-Commerce activities for small Appalachian businesses and Technology-related job creation. Since the beginning of the program, a special emphasis was placed on trying to help rural communities obtain broadband service. ARC also has significant investments in distance learning applications for rural school districts and tele-health investments in rural health clinics.

## **Delta Regional Authority**

**iDelta** -- In May 2007, the DRA released its information technology plan for the region. The plan, which was presented to the president and Congress, was developed in conjunction with Southern Growth Policies Board. The comprehensive plan to build information technology access and utilization in the region is titled "iDelta: Information Technology in the Delta." Goals of the plan are to improve education, enhance entrepreneurship and improve health care through the use of information technology. The plan provides research and data on the capacity and utilization of information technology in the region. There are recommendations for expanding the availability, usage and awareness of information technology.

The key IT-related areas, which the Authority concentrates on, are:

- Geographic Information Systems
- Tele-health
- Community Access
- Awareness
- Workforce Development
- E-Government
- And, the (proposed) DRA "iDelta Center".

For more information, please go to [iDelta Report \(2 MB\)](#) and [iDelta Recommendations \(4 MB\)](#).



In 2005, the DRA Federal Co-Chairman made the decision to include broadband projects including mapping, infrastructure and deployment as eligible projects under the basic public infrastructure category in the agency's federal grant program. That year, the Governor of Kentucky, allocated his entire federal grant program funding towards broadband deployment for 21 counties in Western Kentucky. For more information about DRA's federal grant program guidelines, ease go to

<http://dra.gov/pdfs/UL%202009%20Eligibility%20Clarification%20Notes.pdf>

- Since 2003, Congress has provided funding to DRA through the USDA Rural Community Advancement Program (RCAP). DRA has been able to use some of the RCAP funding to fund broadband related projects:
  - 2008, \$670,000 for wireless broadband project in Coahoma County, Mississippi,
  - 2008, \$75,000 for mapping projects in Arkansas,
  - 2009, \$350,000 allocated for broadband projects,
  - 2010, \$1.7 million spend plan proposed for broadband projects.

Additionally, DRA is now working on the following bases – DRA region-wide, DRA sub-region and state sub-regions to:

- DRA region-wide: help other states in the region grow their own technology entities, as most DRA states do NOT have an entity -- like Connect Kentucky or the Mississippi Technology Alliance -- with a formalized structure, strengths of partners and shared missions and visions. "Connect Arkansas" is a new entity with some old friends, which the Authority has used as an integral resource as it develops action plans.
- DRA sub-region: helping create a pilot plan, for example, in Delta counties to help grow IT-related assets and to then make best use of those assets (on a pilot/demonstration basis), in a process similar to the highly successful Delta Health Alliance model – which is so well received by federal agencies and Congress. Specifically, the Authority is working with a multi-state entity on a technology-based system for workforce training and development, which will elevate under-employed workers to higher-paying jobs and attract new talent, thereby boosting the economies of at least 3 DRA states. And, that program will be readily replicable for other DRA states to implement as well.
- State sub-region projects: some specific, much-needed (pilot/demonstration) projects – such as: wireless broadband over an under-developed county. The Authority has learned what it takes to accomplish these projects: planning, coordinating, mapping of assets and gaps, capital outlay and on-going operating costs – and, we are making progress in these areas.